



## MARYLAND DRUG CONTROL UPDATE

This report reflects significant trends, data, and major issues relating to drugs in the State of Maryland.

### Maryland At-a-Glance:

- In 2009-2010, Maryland was one of the top ten states for rates in illicit drug dependence of persons age 12 or over.  
*Source:* National Survey on Drug Use and Health (NSDUH) 2009-2010.
- Approximately 8.11 percent of Maryland residents reported past-month use of illicit drugs; the national average was 8.82 percent.
- The drug-induced death rate in Maryland exceeds the national average.
- Heroin is the most commonly cited drug among primary drug treatment admissions in Maryland.

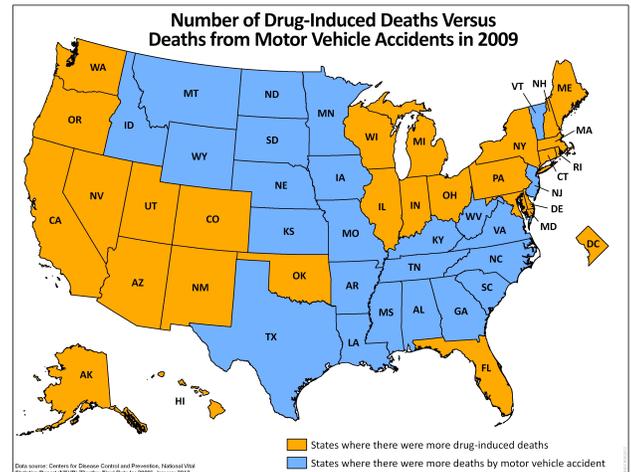
## Drug Use Trends in Maryland

**Drug Use in Maryland:** The National Survey on Drug Use and Health (NSDUH) provides national and state-level data on the use of tobacco, alcohol, illicit drugs (including non-medical use of prescription drugs), and mental health in the United States. In the most recent Survey, 8.11 percent of Maryland residents reported using illicit drugs in the past month. The national average was 8.82 percent. Additionally, 3.2 percent of Maryland residents reported using an illicit drug other than marijuana in the past month (the national average was 3.6 percent).

*Source:* Substance Abuse and Mental Health Services Administration - State Estimates of Substance Use from the 2009-2010 National Survey on Drug Use and Health: <http://store.samhsa.gov/shin/content/SMA11-4641/SMA11-4641.pdf>

**Drug-Induced Deaths:** As a direct consequence of drug use, 768 persons died in Maryland in 2009. This is compared to the number of persons who died in Maryland from motor vehicle accidents (614) and firearms (586) in the same year. Maryland drug-induced deaths (13.5 per 100,000 population) exceeded the national rate (12.8 per 100,000).

*Source:* WONDER online databases: <http://wonder.cdc.gov/cmfi-icd10.html>



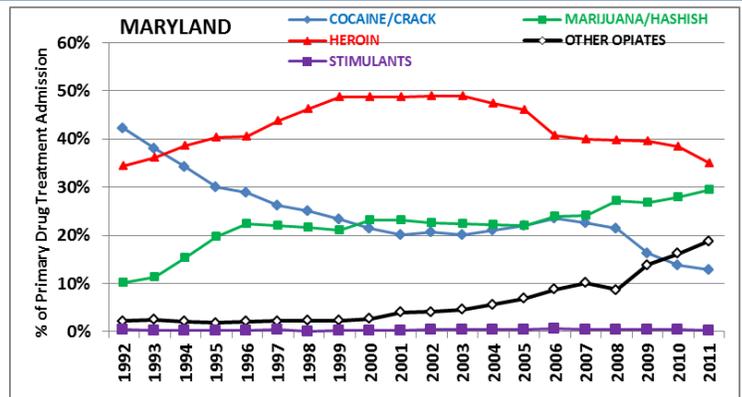
## Substance Abuse Treatment Admissions Data

### Maryland Primary Treatment Admissions:

The graph on the right depicts substance abuse primary treatment admissions in Maryland from 1992 to 2011. The data show heroin is the most commonly cited drug among primary drug treatment admissions in the state.

*Source:* Treatment Episode Data Set, Substance Abuse and Mental Health Services Administration: <http://www.samhsa.gov/data/DASIS.aspx#teds>

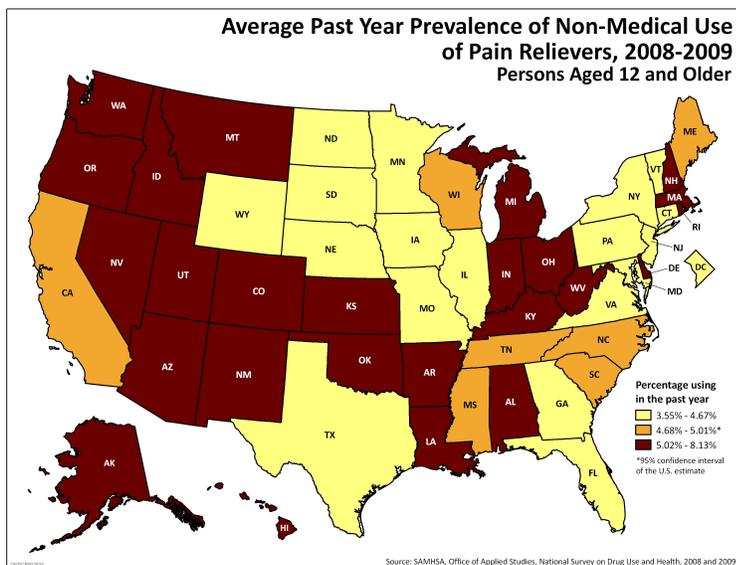
Administration: <http://www.samhsa.gov/data/DASIS.aspx#teds>



# Prescription Drug Abuse

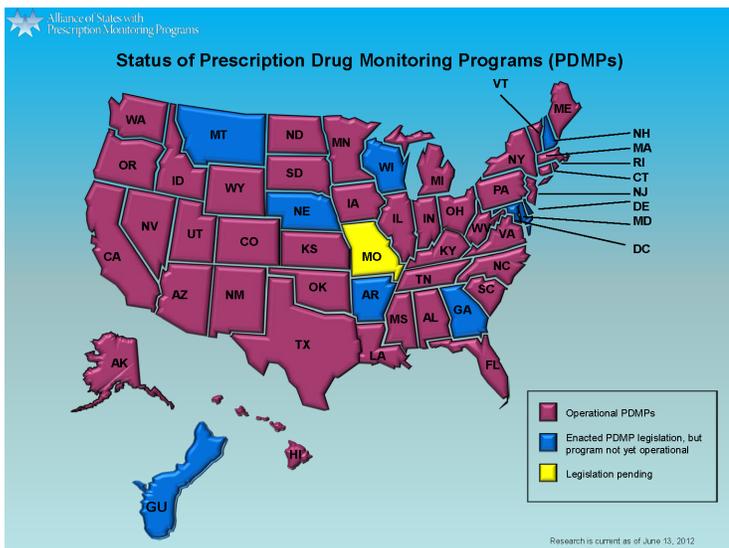
## ONDCP's Efforts to Combat Prescription Drug Abuse

Prescription drug abuse is the fastest-growing drug problem in the Nation. The Administration's Prescription Drug Abuse Prevention Plan entitled "Epidemic: Responding to America's Prescription Drug Abuse Crisis," provides a national framework for reducing prescription drug diversion and abuse by supporting the expansion of state-based prescription drug monitoring programs; recommending secure, more convenient, and environmentally responsible disposal methods to remove expired, unused, or unneeded medications from the home; supporting education for patients and healthcare providers; and reducing the prevalence of pill mills and doctor shopping through enforcement efforts.



### State-Level Action: Prescription Drug Monitoring Programs (PDMPs)

PDMPs track controlled substances prescribed by authorized practitioners and dispensed by pharmacies. PDMPs serve a number of functions, including assisting in patient care, providing early warning signs of drug epidemics, and detecting drug diversion and insurance fraud. Forty-one states have operational PDMP programs established by state legislation and funded by a combination of state and Federal funds. An additional 9 states and territories have a prescription drug monitoring program authorized, but not yet operational. Adequate resourcing, increasing the number of states with operational PDMPs, and development of state-to-state information-sharing systems would significantly help reduce prescription drug diversion and abuse.



On May 10, 2011 Governor Martin O'Malley signed into law **SB 883**, establishing a Prescription Drug Monitoring Program within the Department of Health and Mental Hygiene (DHMH) to monitor the prescribing and dispensing of controlled dangerous substances (CDS). The Program will require authorized dispensers to report to DHMH information for each Schedule II-V CDS dispensed pursuant to a prescription.

Source: [http://dhmh.maryland.gov/pressreleases/pdf/2011/SB883\\_factsheet\\_2.pdf](http://dhmh.maryland.gov/pressreleases/pdf/2011/SB883_factsheet_2.pdf)

### State-Level Action: Drug Take-Back Programs

A comprehensive plan to address prescription drug abuse must include proper disposal of unused, unneeded, or expired medications. Providing individuals with a secure and convenient way to dispose of controlled substances will help prevent diversion and abuse of these substances and demonstrate sound environmental stewardship. Federal rulemaking is underway and will further enhance the viability and scope of state and community take-back programs. In the meantime, states are encouraged to work with the DEA to conduct additional take-back events and educate the public about safe and effective drug return and disposal.

## Drugged Driving

### ONDCP Action on Drugged Driving

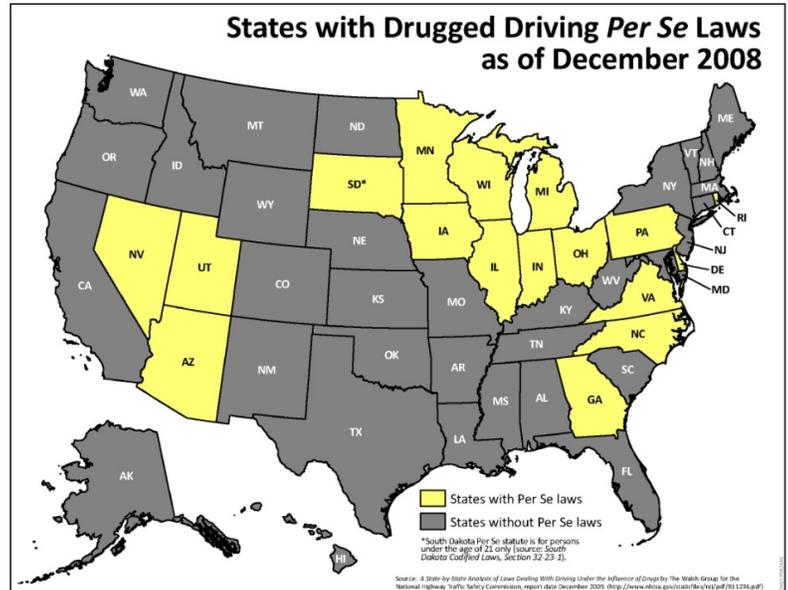
In 2007, the National Highway Traffic Safety Administration (NHTSA) found that one in eight weekend, nighttime drivers tested positive for illicit drugs. According to recent Fatal Accident Reporting System (FARS) data, one in three motor vehicle fatalities (33 percent) with known drug test results tested positive for drugs in 2009. Recognizing this growing problem, ONDCP is working to raise awareness of the dangers of drugged driving, provide increased training to law enforcement in identifying drugged drivers, and encourage states to consider *Per Se* laws to facilitate effective enforcement and prosecution of those who drive with drugs in their systems.

### State-Level Action: Enacting *Per Se* Standards for Impairment

Although all 50 states have laws against drugged driving, law enforcement often lacks adequate tools to enforce and prosecute drugged driving. ONDCP encourages states to develop and implement *Per Se* standards that make it illegal to drive a vehicle after taking illegal drugs. This is the same standard used successfully for 12 million commercial drivers in the United States over the past two decades. *Per Se* standards have been adopted in 17 states.

According to the **Annotated Code of Maryland**: Transportation Section 21-902, a person may not drive any vehicle while he is so far impaired by any drug, any combination of drugs, or a combination of one or more drugs and alcohol that he cannot drive a vehicle safely or in the case that the person is not entitled to use the controlled dangerous substance under the laws of Maryland. Legal entitlement to use any drug is not a defense to (c)(1) unless the person was unaware that the drug would make him incapable of safely driving. The fact of refusal to submit is admissible in court. Evidence of a refusal can only be admitted if it is material and relevant to issues related to a DUI offense

Source: *A State-by-State Analysis of Laws Dealing With Driving Under the Influence of Drugs*, by the Walsh Group for the National Highway Traffic Safety Administration.



## ONDCP Support for Community-Based Prevention

### National Anti-Drug Media Campaign

ONDCP's National Youth Anti-Drug Media Campaign provides consistent and credible messages (including those in Native American and Alaska Native communities) to young people about drug abuse and its consequences. *Above the Influence*, a major component of the Campaign, informs and inspires youth to reject illicit drugs and drinking via a mix of national and local advertising vehicles. The Campaign, in close partnership with local community-based, youth-serving organizations, also conducts teen-targeted *Above the Influence* activities to assist local groups with youth drug prevention work in their respective communities

### The Drug Free Communities (DFC) Program

Recognizing that local problems require local solutions, Drug Free Communities (DFC) organizations mobilize communities to prevent youth drug use by creating local data-driven strategies to reduce drug use in the community. ONDCP works to foster the growth of new coalitions and support existing coalitions through the DFC grants.

In FY 2012, the following Maryland coalitions received grants from ONDCP:

- Coalition for Safe Communities
- East Baltimore Drug Free Coalition
- Garrett County Drug and Alcohol Council
- Nehemiah Coalition for Youth Development
- Partnership for a Drug Free Dorchester

Source: Office of National Drug Control Policy  
[http://www.ondcp.gov/dfc/grantee\\_map.html](http://www.ondcp.gov/dfc/grantee_map.html)

## ONDCP High Intensity Drug Trafficking Area (HIDTA) County Info

The High Intensity Drug Trafficking Areas (HIDTA) program enhances and coordinates drug control efforts among local, state, and Federal law enforcement agencies. In designated HIDTA counties, the program provides agencies with coordination, equipment, technology, and additional resources to combat drug trafficking and its harmful consequences in critical regions of the United States.

**Washington/Baltimore HIDTA:** Anne Arundel, Baltimore, Charles, Hartford, Howard, Montgomery, Prince George's and Wicomico counties, and the city of Baltimore.

- The W/B HIDTA uses a variety of mechanisms to enhance information sharing. One such system is Case Explorer (CE), a web-based case management and case/subject deconfliction system. CE's capabilities include case management, target deconfliction, event deconfliction, spatial awareness, and the National Virtual Pointer System.
- The W/B HIDTA provides the Gang Intelligence System (GIS) at no cost to all law enforcement and criminal justice agencies in the W/B region. The GIS enables gang investigators in the region to share gang intelligence and update information on gang members moving between jurisdictions. W/B HIDTA also maintains an independent, public gang website through which the public can research gang information and locations, as well as anonymously report suspected gang activity.
- The W/B HIDTA Cell Phone Extraction Project supports participating agencies, initiatives, and many other law enforcement agencies in the W/B region. The W/B HIDTA has 16 Cellebrite Universal Forensics Extraction Devices (UFEDs). W/B HIDTA analysts and UFED users extract data from seized cellular phones and SIM cards, as allowed by and consistent with local, state and/or Federal statutes. Data from the phones are collated with the telephone toll data acquired while supporting other cases to comprise a vast telephone toll database. This information is not only for case deconfliction, but also to develop the structure of drug trafficking and money laundering organizations in the region.
- The W/B HIDTA Crime Mapping Unit supports law enforcement efforts with sophisticated crime mapping and analysis services. Staff utilizes the latest developments in geographic information systems (GIS) software and cutting-edge geographic analysis techniques, along with existing crime-related databases, to help law enforcement agencies achieve greater efficiency and effectiveness in their enforcement efforts.

## Federal Grant Awards Available to Reduce Drug Use in the State of Maryland

The Federal Government awards competitive grants to help states in their efforts to reduce drug use and its harmful consequences. In FY 2012, direct support was provided to state and local governments, schools, and law enforcement organizations in your state for this purpose. Some Federal grant programs are dedicated to reducing drug use and its harmful consequences while others can be used for reducing drug use or for other purposes. In FY 2012, your State received support under the grant programs shown below.

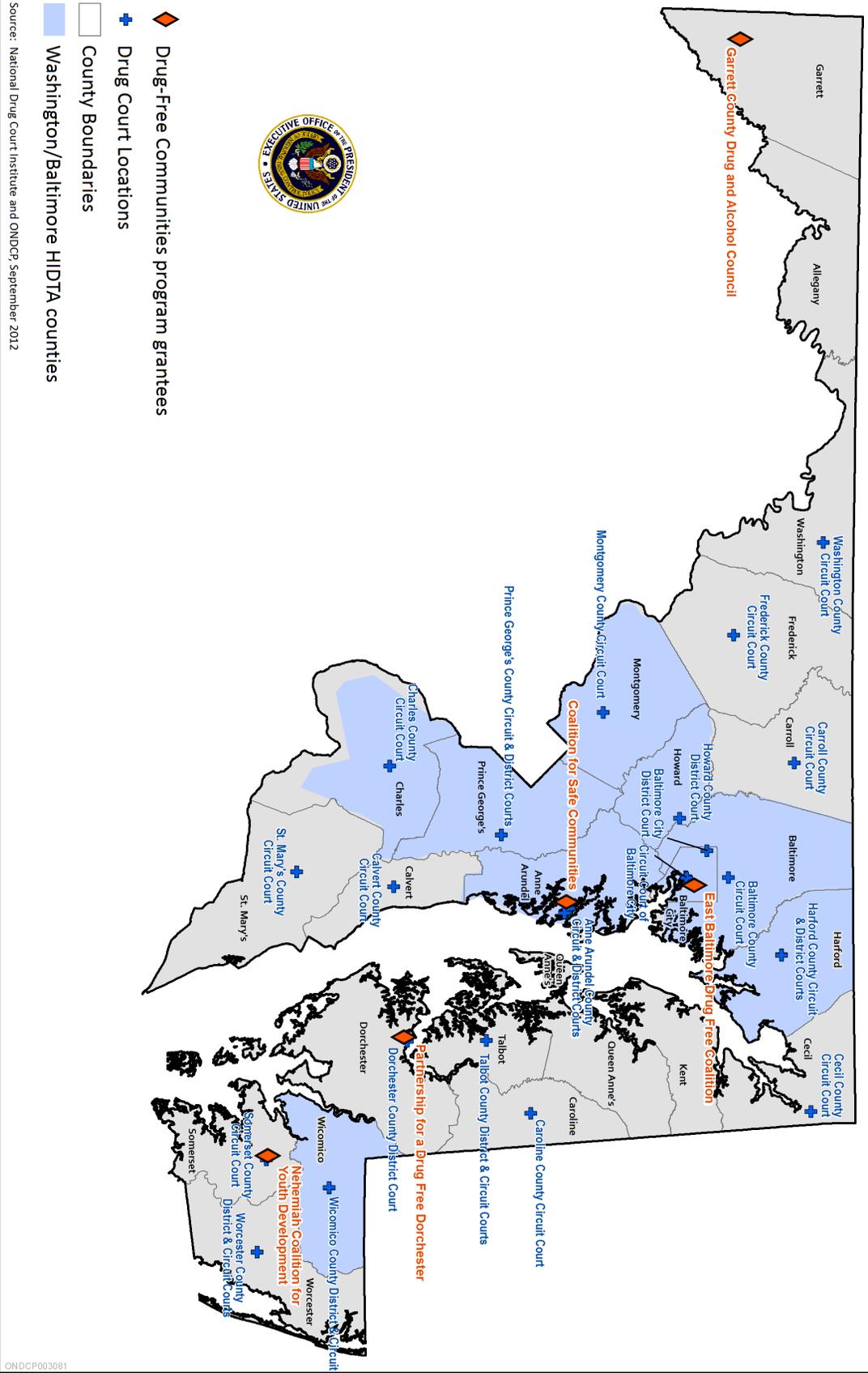
<b>Federal Grant Awards That Help Reduce the Availability and Misuse Of Drugs In The State of MD</b>	
<b>Department / Office / Program Name</b>	<b>2012</b>
<b>Department of Agriculture</b>	<b>\$ 7,131,112</b>
<b>National Institute of Food and Agriculture</b>	
Cooperative Extension Service	\$ 7,131,112
<b>Department of Education</b>	<b>\$ 17,428,751</b>
<b>Office of Elementary and Secondary Education</b>	
Safe and Drug-Free Schools and Communities National Programs	\$ 3,165,907
Twenty-First Century Community Learning Centers	\$ 14,262,844
<b>Department of Health and Human Services</b>	<b>\$ 293,516,971</b>
<b>Administration for Children and Families</b>	
Promoting Safe and Stable Families	\$ 4,220,662
Transitional Living for Homeless Youth	\$ 200,000
<b>Centers For Medicare and Medicaid Services</b>	
Medical Assistance Program - Grants to States for Medicaid To Treat Substance Abuse	\$ 113,234,138
<b>National Institutes Of Health</b>	
Alcohol Research Programs	\$ 26,627,484
Drug Abuse and Addiction Research Programs	\$ 101,281,680
Drug Abuse National Research Service Awards for Research Training	\$ 70,856
<b>Substance Abuse and Mental Health Services Administration</b>	
Block Grants for Prevention and Treatment of Substance Abuse	\$ 31,737,430
Projects for Assistance in Transition from Homelessness (PATH)	\$ 1,281,000
Substance Abuse and Mental Health Services Projects of Regional and National Significance	\$ 11,211,178
Substance Abuse and Mental Health Services-Access to Recovery	\$ 1,302,543
<b>Health Resources and Services Administration</b>	
Healthy Start Initiative	\$ 2,350,000
<b>Department of Housing and Urban Development</b>	<b>\$ 59,137,078</b>
<b>Community Planning and Development</b>	
Emergency Shelter Grants Program	\$ 1,692,190
Emergency Solutions Grant Program	\$ 3,569,617
Shelter Plus Care	\$ 18,984,064
Supportive Housing Program	\$ 34,891,207
<b>Department Of Justice</b>	<b>\$ 17,406,441</b>
<b>Office of Justice Programs</b>	
Byrne Criminal Justice Innovation Program	\$ 938,773
Edward Byrne Memorial Justice Assistance Grant Program	\$ 6,338,099
Enforcing Underage Drinking Laws Program	\$ 982,545
Harold Rogers Prescription Drug Monitoring Program	\$ 400,000
Juvenile Accountability Block Grants	\$ 885,888
Juvenile Justice and Delinquency Prevention Allocation to States	\$ 470,909
Juvenile Mentoring Program	\$ 6,647,910
Residential Substance Abuse Treatment for State Prisoners	\$ 142,771
Second Chance Act Prisoner Reentry Initiative	\$ 599,546
<b>Department of Labor</b>	<b>\$ 3,609,925</b>
<b>Employment and Training Administration</b>	
Reintegration of Ex-Offenders	\$ 2,509,927
Youthbuild	\$ 1,099,998
<b>Department of Transportation</b>	<b>\$ 5,614,418</b>

**Federal Grant Awards That Help Reduce the Availability and Misuse Of Drugs In The State of MD**

<b>Department / Office / Program Name</b>	<b>2012</b>
<b>National Highway Traffic Safety Administration</b>	
Alcohol Impaired Driving Countermeasures Incentive Grants I	\$ 1,835,034
Minimum Penalties for Repeat Offenders for Driving While Intoxicated	\$ 3,779,384
<b>Department of Veteran's Affairs</b>	<b>\$ 3,550,944</b>
<b>Veterans Health Administration</b>	
VA Homeless Providers Grant and Per Diem Program	\$ 3,550,944
<b>Executive Office of The President</b>	<b>\$ 9,919,900</b>
<b>Office of National Drug Control Policy</b>	
Drug-Free Communities Support Program Grants	\$ 500,000
High Intensity Drug Trafficking Areas Program	\$ 9,419,900
<b>Grand Total</b>	<b>\$ 417,315,540</b>

File updated January, 2013.

# Office of National Drug Control Policy Programs in Maryland and Drug Court Locations



Source: National Drug Court Institute and ONDCP, September 2012